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Method of Refund:

*over payment
FEE*

☐ **ACH/EFT**

☐ **Credit Card**

☒ **Deposit Account #** 180013

☐ **Treasury Check**

Patent/TM/App/Serial # 09/972944

Program Area Publishing

Date Processed 7/23/2007

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To: USPTO - Refunds ATTN: LATRICE SIMS**From: Alicia Dylewski****Fax: (571) 273-6500****Pages: 2 (TWO) + Coversheet****Phone:****Date: July 17, 2007****Re: Deposit Account No. 18-0013 Application No. 09/972,944 Docket 85242-0012****Charged 3/08/2004 & 12/14/2006**

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

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Alicia Dylewski, Billing Coordinator
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Adjustment date: 08/02/2007 RCLEMONS
12/14/2006 HBERHE1 00000001 180013 09972944
01 FC:1501 1400.00 CR

02 FC:1504 300.00 CR

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Account No.	180013
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Page	7

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Account No.	180013
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Page	12

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MS0200 (9/2006)

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